



Colorado State Parks

Please fill in the Park Address and Return completed application to:

Address: _____

Fax: ____-____-____

Phone: ____-____-____

Temporary Employment Application

Name: _____
Last First Middle

Social Security Number: _____ - _____ - _____

Address: _____
Street

City

State

Zip

Telephone: _____
Home Cell

E-mail Address: _____ Best Time to Call _____

Voluntary Information

The information in this box is voluntary. Information is requested for federal record keeping purposes only. This sheet will be permanently separated from the rest of your application. It is the policy of the state that its work force reflect the diversity of the state.

Ethnicity/Race-Check only one:

- 1- Black or African American, not Hispanic or Latino
- 2- American Indian or Alaska Native, not Hispanic or Latino
- 3- Asian, not Hispanic or Latino
- 4- Hispanic or Latino
- 5- White, not Hispanic or Latino
- 6- Native Hawaiian or Pacific Islander, not Hispanic or Latino
- 7- Two or more Races, not Hispanic or Latino

Gender: Male Female

Birth Date: Some positions have a legally required minimum age. Provide your entire birth date to be considered for these type(s) of jobs.

Month: _____ Day: _____ Year: _____

Applicant name: _____

Position you are applying for (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> ANS Inspection Technician | <input type="checkbox"/> Maintenance Technician |
| <input type="checkbox"/> Interpreter/Volunteer Coordinator | <input type="checkbox"/> Revenue Work Leader |
| <input type="checkbox"/> Life Guard | <input type="checkbox"/> Visitor Service Technician |
| <input type="checkbox"/> Other _____ | |

When are you able to start? _____

What hours are you available to work? _____

If you are under 16, can you furnish a work permit? **Yes** _____ **No** _____

Have you ever been employed by state parks before? Yes _____ No _____

If yes, give dates ____/____/____ to ____/____/____

Where _____

Employment History

In the following sections, please list your work history, including part-time, temporary, and volunteer jobs. List jobs in reverse order, starting with your present or most recent job. You may attach additional pages if necessary. Applications lacking sufficient information will be rejected.

Position Held _____	Dates of Employment: From _____ To _____
Employer: _____	Reason for Leaving: _____
Street Address: _____	Supervisor's Name: _____
City: _____ State: _____ Zip: _____	Supervisor's Title: _____
Telephone Numbers: _____	Salary: _____
List Specific Duties: _____	# of Employees Supervised: _____

Position Held _____	Dates of Employment: From _____ To _____
Employer: _____	Reason for Leaving: _____
Street Address: _____	Supervisor's Name: _____
City: _____ State: _____ Zip: _____	Supervisor's Title: _____
Telephone Numbers: _____	Salary: _____
List Specific Duties: _____	# of Employees Supervised: _____

Applicant name: _____

Employment History

Continued...

<p>Position Held _____</p> <p>Employer: _____</p> <p>Street Address: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Telephone Numbers: _____</p> <p>List Specific Duties: _____</p> <p>_____</p>	<p style="text-align: center;">Dates of Employment:</p> <p>From _____ To _____</p> <p>_____</p> <p>Reason for Leaving: _____</p> <p>Supervisor's Name: _____</p> <p>Supervisor's Title: _____</p> <p>Salary: _____</p> <p># of Employees Supervised: _____</p>
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<p>Position Held _____</p> <p>Employer: _____</p> <p>Street Address: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Telephone Numbers: _____</p> <p>List Specific Duties: _____</p> <p>_____</p>	<p style="text-align: center;">Dates of Employment:</p> <p>From _____ To _____</p> <p>_____</p> <p>Reason for Leaving: _____</p> <p>Supervisor's Name: _____</p> <p>Supervisor's Title: _____</p> <p>Salary: _____</p> <p># of Employees Supervised: _____</p>
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<p>Position Held _____</p> <p>Employer: _____</p> <p>Street Address: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Telephone Numbers: _____</p> <p>List Specific Duties: _____</p> <p>_____</p>	<p style="text-align: center;">Dates of Employment:</p> <p>From _____ To _____</p> <p>_____</p> <p>Reason for Leaving: _____</p> <p>Supervisor's Name: _____</p> <p>Supervisor's Title: _____</p> <p>Salary: _____</p> <p># of Employees Supervised: _____</p>
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Applicant name: _____

Education

High School Graduate/GED: ____ Yes ____ No. If yes, date of graduation _____ School _____
If no, last grade completed _____ School _____

College/University:

Name and Location	From	To	Major Field	Degree Type
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Vocational, Trade, Technical and Other Training:

Name and Location	From	To	Program/Subjects	Degree Type
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Licenses and Certificates

(First Aid, CPR, Lifeguard, EMT, etc.)

Current Driver's License: Number _____ State _____ License Type _____

Professional/Specialty License	Issuing Agency	Number	Expiration Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

List any special skills or training that may meet any necessary requirements stated on the announcement.

References

List information of three business or work references who are not related to you and are not previous supervisors. If not applicable, list three school or personal references who are not related to you.

Name	Address	Telephone	Occupation	Years Known
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Additional Information

List any additional information you would like us to consider. _____

Certification

I certify that I possess the experience, education and/or licenses required for the job for which I am applying. I certify that all statements, information and documents provided with this application are true, complete and correct to the best of my knowledge and are made in good faith. I understand that omissions, misleading, false or untrue information, or any attempt at fraud or deceit in any manner connected with this application and subsequent testing may result in my NOT being considered for jobs with the State of Colorado, may constitute grounds for discipline and/or termination after hire, and/or may constitute grounds for further actions pursuant to law. If requested, I can and will supply documentation that will confirm that the entries made on this application are true, complete and correct. Notice to individuals applying for employment with a child care provider or facility, per Colorado Revised Statutes (C.R.S.) 26-6-105.5, "Any applicant who knowingly or willfully makes a false statement of any material fact or thing in this application is guilty of perjury in the second degree as defined in section 18-8-503, Colorado Revised Statutes, and, upon conviction thereof shall be punished accordingly." I am aware that the state of Colorado has a payroll direct deposit requirement for employment. When needed I can supply the correct documentation for direct deposit.

Signature _____ Date _____